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| No. C 124219 | Annual Report Form Due No Later Than November 30. | | 2. Registered Agent and Office NOT A P.O. BOX | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED | Mailing Address - Please Correct If Not Correct: | | CLAUDIA MORRISON 510 N BANNOCK AVE GLENNS FERRY ID 83623 | | |
| | | THREE ISLAND CROSSING ORGANIZATION INC CLAUDIA MORRISON 510 N BANNOCK AVE GLENNS FERRY ID 83623 | | 3. Organized Under the Laws of: C 124219 | |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input checked="" type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) | | | | | |
| <u>Office held</u> | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> |
| President | Claudia Morrison | P.O. Box 639 | Glennsferry, | ID | 83623 |
| 5. <u>New Registered Agent Signature</u> | | 6. Signature <u>Claudia Morrison</u> Date <u>12/31/99</u> Name (Typed or Printed) <u>CLAUDIA MORRISON</u> Title <u>President</u> | | | |